PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

/ 0043784

			ive Octobo	, ,,					1004.	<u> </u>	07	
CLAIMS AS FILED - PART ((Column 1)						nn 2)		SMALL ENTITY TYPE		OTHER THA		
TO	TAL CLAIMS		16					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TO'	TAL CHARGEAE	BLE CLAIMS	(C_minus 20=		•			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	2 - minus 3 =		* —			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, ent					r "O" in c	olumn 2		TOTAL		OR	TOTAL	740
	CI	AIMS AS A	MENDED	- PART II (Column 2) (Column 3)				SMALL ENTITY			OTHER THAN OR SMALL ENTITY	
NTA		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	.18	Minus	* *0	20	=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	·a	Minus	*** \	3_	=	ļ	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	TCLAIM		1	+140=		OR	+280=	
						-		TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	L					
NT B	186	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DMC	Total	. (9	Minus	**	QÇ	=	}	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	. 8	Minus	***	<u>Z</u>	-	4	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDER	II CLAIM		J	+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
Æ	235-09	(Column 1)			umn 2)	(Column 3)_			_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PRE\	HEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	. 234	Minus	2	5	-4		X\$ 9=		OR		72.00
WE!	Independent	. &	Minus	***		<u> 3</u>	4	X42=			75 S	264.05
╠	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTA	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

	PATE	NT APPLIC	ATION	FEE DETER te for Form PTO	RMINATION	a collection of infor			on or Docket Nur O4 37 り		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY									OTHER THAN SMALL ENTITY		
FOR NUMBER FILED			NUMBER	R EXTRA	RATE	FEE		RATE	FEE		
BASIC FEE							\$	OR		\$	
(37 CFR 1.16(a)) TOTAL CLAIMS			minus 20			X \$ =	· -	OR	X \$=		
DE	FR 1.16(c)) PENDENT CLAIM	S				X S	-	OR	x \$=		
(37 CFR 1.16(b)) minus 3 = 1							OR-	+s =			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+5=					
lf t	e difference in \propto	olumn 1 is less tha	n zero, en	ter "0" in column 2	2.	TOTAL		OR	TOTAL		
	CL	AIMS AS AME	NDED	– PART II							
4/13-75 (Column 1) (Column 2) (Column 3)						SMALL E	NTITY	OR	OTHEF SMALL		
A IN		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE	
ENDMEN	Total (37 CFR 1.16(c))	. 34	Minus	"24	Ø	x s=		OR	x s=		
	Independent (37 CFR 1.16(b))	. 6	Minus	9	Ø	x \$=		OR	x \$=		
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	+ \$=		
	11011125					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)			- -			
N B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA FEE	
Ĭ	Total (37 CFR 1.16(c))	•	Minus	••	=	x s=		OR	x \$=		
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	•••	=	x \$=		OR	x \$=		
	FIRST DOCCENT	ATION OF MILE TIPE	ENT CLAIM (37 C	±- 2+		OR	+s=				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						TOTAL ADD'L FEE		ÓR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)			_			
O F		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADD TION/ FEE	
图	Total (37 CFR 1.16(c))	*	Minus	**	= .	x \$=		OR	x \$=		
Q	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x \$=		
z		TATION OF MULTIPI	DENT CLAIM (37 C	FR 1.16(d))	+\$=		OR	+ s=			
AMENDMENT	I EIBST OBESEN			_	TOTAL						

"" If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, useful or preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.